## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Appliq	ation or E	ocket N	umber
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¥ }		TY)	4211

Γ		CLAIMS	AS FILED	- PART I		CMALL EN	<u> </u>	<u> </u>	( ( )		-
			(Colun	nn 1)	(Column 2)	SMALL EN TYPE		OR	OTHER SMALL		
U.S	S. NATIONAL	STAGE FEES				RATÉ	FEE	7	RATE	FEE	1
BASIC FEE SMALL ENT. = \$ 150 LARGE ENT. = \$ 300				BASIC FEE	150	OR	BASIC FEE		$\dashv$		
EXAMINATION FEE			Satisfies PCT Article 33(1)- All other situations = (4) = \$50 / \$ 100  \$ 100 / \$ 200		EXAM. FEE	200		EXAM, FEE	<del> </del>	-	
SEARCH FEE			U.S. is ISA = ALL other co	\$ 50 / \$ 100 ountries =	All other situations = \$ 250 / \$ 500	SEARCH FEE	100		SEARCH FEE		1
FEE FOR EXTRA SPEC. PGS.			4 min	nus 100 =	/ 50 =	X \$ 125 =		1	X \$ 250 =	<del> </del>	1
TOTAL CHARGEABLE CLAIMS   minus 20 = .					X \$ 25 =		OR	X \$ 50 =	<del> </del>	1	
INDEPENDENT CLAIMS			2 "	ninus 3 = +		X \$ 100 =		OR	X \$ 200 =	<del> </del>	┨
MUI	TIPLE DEPEN	IDENT CLAIM PR	ESENT			+ \$ 180 =		OR	+ \$ 360 =	<del> </del>	1
* If the difference in column 1 is less than zero, enter "0" in column 2					TOTAL	450	OR	TOTAL	<del>                                     </del>	$\frac{1}{2}$	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)					SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY			
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT LY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
<b>AMENDMENT</b>	Total	*	Minus	**	=	X \$ 25 =		OR	X \$ 50 =		C
AME	Independent	*	Minus	***	=	X \$ 100 =		OR	X \$ 200 =		0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+ \$ 180 =	·	OR	+ \$ 360 =		4	
	•					TOTAL ADDIT. FEE		ОR	TOTAL ADDIT. FEE		
		(Column 1)		(Column 2	2) (Column 3)						֚֟֝֝֝֟֝֟֝֟֝֟֝֟֝֟֓֓֓֟֟֟֟֓֟֟֟֟֟֓֟֟֟֓֟֟֟֟֓֟֟֓֟֓֟֓֟֓֟֟֓֓֟֟֓֓֟֓֟
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	ľ
NDME	Total	*	Minus	**	=	X \$ 25 =		OR	X \$ 50 =		2
AME	Independent	*	Minus	***	=	X \$ 100 =		OR	X \$ 200 =		-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+ \$ 180 =		OR	+ \$ 360 =			
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
** (	f the "Highest Nu	mn 1 is less than the mber Previously Paid mber Previously Paid	For IN THIS SP	ACF is less than	n '20' enter "20"		·				

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.